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REMARKS ON
Some European Asylums.

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N. Y.

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The following notes, made during a recent visit to institutions for the insane abroad, may prove interesting to those who can not undertake a similar journey. The winter was a rather bleak and cheerless season for visiting the more northern asylums.

HOLLAND.—The Meerenberg asylum, near Haarlem, has nearly nine hundred patients, and they are building for four hundred more. The present structure is quite old, but the perfect spotlessness of the sanded floors, and the immaculate condition of the white walls, bore witness to the proverbial neatness of the nation. The grounds are large and handsome, but not extensive enough for farming. The patients come mostly from Amsterdam, and as there are naturally many handicraftsmen among city patients, the employments for men here consist of tailoring, carpentering, shoe-making, mattress-making, and other similar occupations. The women sew, knit and work in the kitchen and laundry. There are numerous padded cells in the wards, which are unpleasant to look at. The beds in these are of peculiar construction. They are like shallow bath-tubs, over which canvas is stretched. Upon this the patient's mattress lies. The lower part of the bed has immediate connection with the sewer. No mechanical restraint is employed in this asylum. There are no dormitories for more than twenty patients. There are two night watches for each sex, and two others patrol the grounds. The institution is built on the block plan; but back of the older and larger building is a new structure for quiet patients. The entire administration is in charge of a medical head. The director has four assistants and a pathologist. The pathological work done here merits more than passing notice. The mortuary and pathological laboratory occupy a separate little building, and are very complete in every respect.



Autopsies are made on all patients dying in the asylum, and average some eighty in number yearly. The last annual report of the institution contains a forty-eight page description of the post mortems made during the past year, which is very instructive, and shows what careful and painstaking examinations are carried out by Dr. Jelgersma. He reports finding atrophy of the cornu ammonis of one side in each of thirty cases of epilepsy recently studied. For several years the director has had a school for patients, and evenings for singing familiar Dutch folk-songs are great favorites of the patients. The medical treatment at Meerenberg does not materially differ from that of other institutions.

The newest asylum in Holland is that at Vught. It has received patients for a year only, and is not yet wholly completed. The grounds are much broken, rough, unfinished. The plan of the building is mediæval, resembling a cloister or a prison, which is much lamented by the director, Dr. A. O. H. Tellegen. It was constructed, however, by a board of trustees, consisting altogether of laymen. There are now some five hundred patients, but the asylum will ultimately accommodate six hundred and twenty-five. It is built about numerous bare courtyards, into which many curiously arranged cells open, some without windows at all, very much like stalls into a barnyard. But there are few single rooms, the tendency here, as elsewhere on the continent, being to small dormitories, of which the largest do not accommodate more than twenty-five patients, with twenty-four cubic metres of air space for each. The cleanliness of the patients and of everything about the asylum, was as noteworthy here as at Meerenberg, and the indoor occupation of the inmates seemed to be carried out to an admirable degree. The nurses are all Roman Catholic brothers and sisters. There was a generous use of mechanical restraint, especially among the women.

BELGIUM.—I took dinner at the Hotel de l'Agneau at Gheel. Among others at the table was a young Englishman, evidently an imbecile, who had been a patient in this historic village for two years or more, having rooms in the town and taking his meals at the hotel. It was rather a pleasant introduction to the character of the colony to meet one of the patients in this wise. Gheel itself has about twelve thousand inhabitants, and the insane, to the number of some seventeen hundred, are scattered about in this town and many neighboring hamlets. They are all under the

supervision of a director, Dr. Peters, and several assistant physicians. There is an infirmary in the town for one hundred patients, where the sick and any who break out into temporary excitement are cared for; and it is there that the director and one or two assistants live, while the rest of the medical staff reside in various parts of the town. It is well to state here that the worst cases of insanity are not kept in Gheel at all, but are sent to the male and female asylums at Ghent. Dr. Peters was not at home at the time of my visit, but through the kindness of Dr. Cuisenaire, I was shown the patients in private houses in Gheel, not only the best, but the worst, not only the richest but the poorest.

Upon the whole the pensionnaires seemed comfortable and happy, the insane peasants and laborers as well as the barons and counts. But there are unpleasant things to see in Gheel. For the poorest classes the quarters often seemed dirty and unhealthful, yet fully as good as the families which boarded them themselves enjoyed, and doubtless as good as they had ever had before becoming deranged. In the kitchen of one house was a maniacal English woman in a muff. In another house was an epileptic dement fastened in a chair by means of a board across the front. All of the doors were locked in some of the houses, so that we had to knock some time before gaining admittance to inspect the patients and their rooms. It is possible that it is necessary in a town of this kind to lock doors in order to keep people out, rather than to keep them in. In the streets and gardens one meets many patients walking about, going to church, to visit each other, etc., and in less wintry weather there must be a much larger number who enjoy such unrestricted freedom. Dr. Cuisenaire told me that in the past fifty years but two accidents have occurred, viz: forty years ago the mayor of the town was stabbed by a patient with persecutory delusions, and ten years ago a patient holding a child in her arms, suddenly threw it to the ground, killing it. But certainly assault and murder are more frequent than this in other villages possessing a less peculiar population. It would be interesting to learn whether illegitimate births occur among the patients. It seems to me that there is opportunity for vice of this nature. Long residence in the place would be needed to clear up doubt in this matter. But considering all things, every opportunity is here afforded to patients in any degree trustworthy, to enjoy liberty, occupy themselves usefully, and lead a pleasant life. There are no doubt abuses, possibly from a lax use of restraint, from unkind treatment by members of families in which the

patients board, etc. Yet these are, to a considerable extent, remedied by the supervision of competent physicians, and probably do not exceed similar abuses which can creep into some of our best large asylums. Patients in Gheel can attain the utmost limits of freedom compatible with their condition, and relative to their deportment. The tendency here is to individualize cases, whereas in a state of aggregation they are treated and fed "wholesale," so to say.

One is well repaid by a visit to the Hospice Guislain at Ghent. Dr. Ingels, famous as its former director, died not long ago from a dissection wound, and was succeeded by the well-known Dr. Morel. The latter is very courteous to visitors and took great pains to show me all that was interesting. The asylum was constructed thirty years ago in the "cloister" style of architecture, is for the male sex only, and has about five hundred inmates. The attendants and instructors are monks. The most notable feature of this institution is the number and variety of occupations for patients. Some twenty men were employed in winding thread and yarn on shuttles for the looms. There were twelve looms, six of which were busy at the hour of my visit, weaving linen, checked table cloths and black cloth. In the tailor-shop all the wearing apparel of the establishment is made. In the worst ward great quiet reigned, and nearly every one of the forty patients there was engaged in picking cotton from pasteboard spools; and in another disturbed ward the patients were industriously making paper bags. In the shoe-shop all the foot-wear of the asylum is made and mended. Many were at work in various places, in a forge, carpenter-shop, laundry, butcher-shop, kitchen, and in the garden. A kindergarten for boys under fourteen has been in operation some years; here thirty boys were busy at the time of my visit. There is also a school of music, and a well-practiced orchestra of twenty pieces. The regularly employed number about sixty-five per cent of the population.

The day-rooms are down stairs, the dormitories on the second floor. None of the latter contains more than twenty-five beds. The day-rooms are pleasingly decorated with pictures, crosses, flowers, etc., which are almost wholly of religious character and significance, and most of them contain aviaries. The courtyards have handsome shrubbery and dove-cotes, and the doves are great pets of the patients.

Cleanliness did not seem to be so marked here as in the Holland asylums. In one room for idiot boys the odor was almost unendurable. The laundry and kitchen were not neat.

Mechanical restraint is in use. I noted two men in leather mittens strapped around the waist, and in one room all the patients (eight general paralytics) were sitting close together in a row on stool-chairs, a board across the front and a perpendicular stick between the legs of each, being a device to keep them there.

The medical treatment presents nothing new. This institution has added much to our knowledge of insanity and cerebral pathology. Professor Ingels was an indefatigable worker, and literally immolated himself upon the dissecting table. Dr. Morel is a worthy successor. It is surprising that the superintendent of so large an establishment can find time for so much work. He resides alone at the asylum, having but one assistant, and he a non-resident.

GERMANY.—The Bremen City Hospital has an insane department, with about one hundred and fifty patients in one old and one new building. These two buildings standing together call to mind the contrast between the manner of housing the insane to-day and that of two decades ago—the one gloomy, cheerless, well-barred, prison-like; the other new, bright, with unguarded windows and cheerful curtains.

The single rooms in the new portion had an inviting look. Their windows, with large panes of heavy plate glass, let in floods of sunshine to fall upon the neatly painted walls and linoleum-covered floors. All the wards have large paintings, clocks, curtains, rugs, etc. The attendants here are evangelical brothers and sisters from the training school for deacons and deaconesses at Bielefeld.* The director, Dr. Scholz, is one of the strong advocates of the treatment of maniacal cases with the wet-pack, i. e., enveloping them in a wet sheet and a dry blanket. This is the only form of restraint used, if this can be called restraint. The quietest wards in the female and male divisions have open doors during the day. But the "open door system" I find has very little meaning when the asylum grounds are surrounded by high walls or iron fences, at whose gates keepers are always stationed.

The Göttingen asylum was built over twenty years ago in the "cloister" style of architecture, as its director, Professor Meyer, is pleased to term it. He told me that in the middle ages, when the insane began to be taken from dungeons, jails, etc., and put in

* See "The Epileptic Colony at Bielefeld," *New York Medical Record*, April 23, 1887.

buildings by themselves, the deserted cloisters, convents, monasteries, were first appropriated for the purpose; and when, subsequently, new structures were required, the English began to build upon the same plan as the establishments already in use. Hence the cloister style of asylum architecture, afterward copied over the continent from the English. Since my first visit to the Göttingen asylum, five years ago, additions have been made, but in the shape of separate villas, Professor Meyer being a strong advocate of the villa system. There are some four hundred patients, men and women, and the chief occupation for both sexes is farming. Porcelain stoves are the chief means of heating; but in several places indirect radiation is resorted to. Ventilation is wholly by windows.

No restraint is used. Professor Meyer expressed himself as strongly opposed to the use of the wet-pack in maniacal cases, saying that it had no remedial effect, and seemed to him only an unpleasant form of restraint. Maniacal cases are treated here by being put to bed in a small ward (not isolated) and by the administration of potassii bromid. in large doses, amounting sometimes to twenty-four grammes daily, occasionally even eight grammes at a dose! Cases that are very destructive and filthy he places in an isolated room without clothes, with a large pile of sea-grass for a bed. He claims for this that it forms a soft, comfortable, very clean and indestructible bed.

The new villas completed and undergoing construction are for twenty to twenty-five patients each, are two stories high, without guarded windows, with dormitories up stairs and day-rooms below.

The largest asylum in Germany is at Hildesheim with eight hundred patients. It is antiquated. Near by is Ilten, where about one hundred insane are now boarded out on the Gheel plan, the only colony of the kind in Germany.

The asylum at Marburg was built in 1876 on the villa plan at the suggestion of Professor Meyer of Göttingen. It was destined for the reception of two hundred and fifty curable cases, but this system of separation failed as it has done in New York, most of the patients being chronic and incurable. Indeed, some twenty pauper chronics of each sex, who are good workers, are purposely retained here for farm work, which is the chief employment. Women have sole charge of the kitchen and laundry. The washing is done by hand.

The patients occupy some twelve different buildings, while the

kitchen, laundry, stables, cottages for officers, etc., increase the number of buildings to about twenty-five, nearly all of which have their own pretty gardens separated by hedges. Two classes of patients are received as in our own State asylums, viz., private and pauper, but the two are not indiscriminately mixed. The pay patients occupy buildings by themselves. All of the houses are clean and neatly furnished, having plants, curtains, pictures, birds, etc. The presence of a pair of monkeys (*genus Macacus*) in one ward in a large cage, amusing to look at, reminded me of the advice of a physician to a hypochondriacal clergyman to "buy a monkey." He did so and recovered from his morbid condition through the interest he took in its antics.

The heating is mostly by means of porcelain stoves, in a few single rooms by indirect radiation. The ventilation is from the windows. The sewage irrigates a meadow lower than and somewhat removed from the asylum, and upon the land thus treated rye grass is grown. This method never gives them any trouble. The most important features of this institution are the splendidly equipped chemical and pathological laboratories, and one needs but to cite the first assistant, Dr. Franz Tuczek's work on the Pathology of General Paralysis as a witness to the quality of the research carried on.

As regards treatment in Marburg, the acute maniacs are put to bed in a room together, sometimes as many as ten or fifteen cases, but when too violent are isolated. Paraldehyde and urethran are favorite hypnotics. Lying in bed and feeding well are considered of chief importance in such cases as well as in melancholia. Ten or fifteen melancholiacs are also in a ward, together with two day and two night nurses. Various articles of food are kept in cupboards in these rooms, so that instant advantage may be taken of a desire for food on the part of a patient. Feeding with a tube is eschewed in this asylum. A patient has been allowed to go as long as thirty days without eating. Patients are weighed every week, and scales constructed for this purpose are in use in each building. The only form of restraint practiced is the fastening of the bedclothes at the sides of the bed. Opium is never administered in cases of melancholia. The houses for the laboring patients have open doors. There are bars to the windows of the single rooms only. Other windows have iron sashes and small panes of glass.

The Rhine Province has five asylums, all constructed at about the same time, and all finished some ten or more years ago. I may be pardoned for making here a brief historical survey of the

care of the insane in this province; it may serve as a valuable commentary on the policy of our own State. When, in the beginning of this century, people everywhere awoke to the wrongs done to the insane by confining them in jails, workhouses and poorhouses, one of the first efforts toward reform in the Rhine Province was to establish a hospital for the curable insane. At the instigation of Dr. Max Jacobi, the old Abbey of Siegburg was purchased by the government, in 1823, and transformed into an institution for two hundred patients of both sexes. Various evils developed in the course of time, the building began to fall into ruin, the wards became enormously overcrowded, and the chronic and incurable insane accumulated. Therefore the provincial legislature appointed a commission, in 1864, consisting of six of their number who were to choose and act in concert with a qualified physician and an architect, to investigate the condition at that time of the insane, and the outlook for their future care. They examined into the very unsatisfactory state of affairs, they visited asylums in other parts of Germany, they saw the necessity of geographically districting the province, they recognized the irrational nature of the system of separating the curable and incurable insane, and they embodied their views on these subjects in a very instructive report to the provincial legislature, in 1865. The *first* of the series of eight resolutions presented by this commission was in substance as follows:

"In each of the five government districts of the Rhine Province, viz.: Düsseldorf, Cologne, Aix-la-Chapelle, Coblenz and Trier, shall be built a *mixed asylum for the curable and incurable insane.*"

The italics were theirs.

It is now more than twenty years since they here wisely put an end to a system which is unfortunately still the policy of the State of New York. But other provinces of Germany exhibit a similar historical sequence in the care of the insane. It would be well if those interested in the farther continuance of the old system in New York, would read *Die Provinzial-Irren, Blinden und Taubstummen-Anstalten der Rheinprovinz, etc.,* (Düsseldorf, 1880), from which they will be able to learn that more than forty years ago the establishment of asylums separating the curable and incurable insane was almost wholly abandoned in Germany.

The once famous asylum at Siegburg has been put to new uses since 1878, when the last insane were removed from it. I had time to visit but one of the five new institutions of the province,

viz.: Grafenberg, near Düsseldorf. It is constructed on the pavilion plan, consisting of some fourteen buildings connected by corridors, which are occupied by some five hundred patients. A short distance away is an agricultural colony, where forty patients reside, having open doors, etc., in fact entire freedom. No restraint is used in this asylum. There are no night-watches anywhere. The attendants sleep in the same dormitories with patients and are expected to get up at night when it is necessary for some reason to see to patients. There are a few old-fashioned cells such as we should not build now-a-days, with strong iron window frames and sashes, and glass an inch thick. Women have entire charge of the kitchen and laundry. Dr. Pelman, the director, uses the wet-pack in some cases of excitement, but administers very few hypnotics.

The heating is by stoves. The sewer system is poor, the sewage being carted to neighboring farms. There was a bad odor in the water closets, and everywhere was a certain lack of neatness and cleanliness. Four classes of patients are received, viz.: paupers, and those paying sixty cents, one dollar and two dollars, each per day, respectively, accommodation and food differing for each class.

The University of Strassburg has made great strides since the annexation of Alsace to Germany. Among its many new and imposing structures for various departments, one of the most important is the Clinic for Psychiatry, in charge of Prof. Jolly, which receives cases adapted for instructing the students, such as the different forms of insanity, both acute and chronic, and epilepsy, and some other nervous diseases. From here the surplus passes to the large provincial asylum, Stephansfield, near by. The Clinic is elegantly fitted up, with five small wards for each sex, modern systems of heating and disposing of sewage, telephones and electric bells in every department, etc., etc. Prof. Jolly is a strong advocate of the therapeutic advantages of electricity, hence there is a great supply of electrical apparatus, of every description, especially in the clinical amphitheatre. It is claimed here that the galvanic bath has excellent effect in mild cases of melancholia. The cells for isolating cases are rather prison-like. They have very solid iron window-sashes, with small panes of glass, and devices (to be operated without entering the room) for lowering outside window blinds, raising the upper window sash, and for inspecting the interior—machinery, which to say the least, reminds one more of a menagerie than a hospital. In the filthy wards the so-called

Heidelberg mattress is in use. This is merely a thick hair mattress with a hole in the middle, well covered on every part with rubber cloth. An excellent pathological laboratory is connected with this Clinic, and with von Recklinghausen's laboratory, but a few steps away, we should expect the Strassburg school in time to greatly add to our knowledge of cerebral function and pathology.

The asylum at Munich, with six hundred and twenty-five patients, of which the late Prof. Gudden was the distinguished director, is well worthy of a visit, and his last report, embodying the result of his whole administrative experience, very worthy of perusal. In the pathological laboratory, as a monument to his untiring industry, is an enormous collection of microscopic sections of nerve and brain, as well as large numbers of brains of men and lower animals. Prof. Gudden was cut off in the midst of his work, and although he had already attained eminence, his most valuable studies are incomplete, unfinished.

The asylum lies in the outskirts of the city. From it on the one side are seen the long rows of monotonous houses, on the other the distant ragged peaks of the Alps across the plateau. The patients are all in one building. All the wards have handsome oak floors, and walls brightly painted with colored "silicate" paints. The patients' employments are those common to all institutions; in addition also instruction in the various branches of school learning, and in drawing, music, singing and gymnastics. Restraint is used to about the same extent as in most American asylums. As regards treatment, they think much here of the wet-pack for acute mania, and prolonged warm baths for melancholia. They rarely use hypnotics of any kind. They claim to have seen bad effects from the opium treatment of melancholia.

Another Clinic for Psychiatry was built in Leipzig some three years ago, and is therefore older than that at Strassburg, and is not so neat and clean, nor so well-equipped for work. It is in charge of the famous Prof. Flechsig. On the day of my visit there were some one hundred and thirty patients. This Clinic overflows into the Alt-Scherbitz and other asylums in the neighborhood of the city. Considerable restraint is in use, one form being a suit laced up in the back, with sleeves closed at the ends and sewed fast to the sides. I saw here for the first and last time in my travels a bed devised by Dr. Günz, of Thonberg, an iron bed with an iron framework over it, around which is woven, in wide meshes, straps made of linen, having a door, and looking very

much like a cage. Although a dangerously suicidal or violent patient might be preserved in such a contrivance, it is not agreeable to look at, and it is less effectual and more terrifying to a patient than camisoling and strapping in bed. In one ward were several padded cribs (without covers of course,) for bad cases of epilepsy. The opium treatment of melancholia is being thoroughly tested here at present, in order to decide once for all upon its merits. The prolonged warm bath is also used for a half to two hours before bedtime.

A few miles from Leipzig is the asylum of Alt-Scherbitz, which to me seems in the van of all on the cottage or village plan. It is a newer, cleaner, more modern and more perfect Gheel. Those who like the cottage system for asylums for the insane will find here their *beau idéal*. The government purchased here a farm of some three hundred hectares of land with all the buildings (an old *Rittergut*). Eight two-story villas were then built, quite near together, separated by hedges, and each having its own little garden. The central one of these is the administration building, about which are grouped the other seven villas for the newly-admitted, for the noisy, for the sick, and for the cases requiring watching, of each sex. Past this group of cottages winds a highway, on the opposite side of which are the kitchen, laundry and dairy, with which dormitories are conveniently connected for the female patients who are here employed; and near these the stables and granaries—all of which buildings separate two elevated and fine sites, upon which stand handsome two-story villas, pleasantly grouped, of different architecture, commanding pretty views of the Elster river, flowing in its broad, fertile valley, three for women on one side and four for men on the opposite. Each of these accommodates twenty-five patients, and cost on an average eighteen thousand marks (four thousand five hundred dollars). Close at hand is the farm hamlet, ten of whose houses are occupied by patients. There are two to eight patients in each, and they have their own keys and take every care of their dwellings themselves. In addition to those already described there is one large building, accommodating a great number of chronic, quiet women. The greater part of the food is drawn to all of the houses in a wagon constructed for the purpose. The heating is by porcelain stoves. Everywhere bedrooms and dormitories are up stairs, the day-rooms below. The disposal of sewage is simple and apparently efficacious. Two men with a wagon are employed all day, visiting every building twice daily to remove the closed receiving

tubs under the water-closets, and empty them far out on the farm.

Farming is of course the chief employment, but there are blacksmith, shoe and carpenter-shops, and, not the least interesting feature, a brickyard. This last has proved so useful that it is to be enlarged. They have not only made all their own brick and tiles, but they sell large quantities. All the occupations common to other institutions of the kind are in vogue here. There is a large theatre in a separate building, where dramatic entertainments, concerts, dances, etc., are given, joined in by both sexes. A bowling alley is of course to be found here, as in most German asylums. In the Elster river, which is a small stream from six to twelve feet deep, a swimming bath has been constructed.

The freedom of patients is very great, and there is no depressing aspect about the colony at all, nothing to constantly remind outsiders and insiders of the usual coercive nature of such institutions. All of the villas, for both men and women, and all of the dormitories connected with the dairy, the laundry, the kitchen, the workshops, and all of the houses of the little hamlet, have unlocked doors and unguarded windows. There are no bars on any windows in the whole establishment. The freedom is of course less, the watching greater, in the group of buildings for new, dangerous, suicidal and disturbed classes. The number of nurses in proportion to patients is in the ratio of one to ten. They live with the patients, and sleep in the dormitories with them. Doors and windows are locked at night. In the few cells for isolating acute maniacs there are inside blinds for darkening the rooms. There are no regular night watches employed; but in the reception building for each sex the day-nurses take turns watching at night, one from 7 p. m. until midnight, and another from midnight until 5 a. m., for which they receive extra pay.

On the day of my visit there were five hundred and thirty patients.

AUSTRIA.—The insane asylums are rather disappointing in Austria, especially so (*mirabile dicta!*) in Vienna. In the first place, Prof. Meynert has his clinic in the enormous and antiquated *Allgemeines Krankenhaus*, and in his department there are about one hundred and forty patients. With the exception of the few apartments for private cases, everything has a mediæval aspect. In the cells the windows are near the ceiling and heavily barred. Restraint and seclusion are freely employed. There is no doubt that the patients in this as well as in all other divisions of the

great Vienna hospital are regarded as so many contributors to the advancement of medical learning, but have little consideration as individuals of the human race.

Within a few minutes' walk of the *Allgemeines Krankenhaus* is the large *Landes-Irrenanstalt*, built for seven hundred lunatics, but into which nine hundred are crowded. It is a dreary asylum. There are very few single rooms, dormitories for about ten being most common. The cells are like those of a penitentiary. I noticed women nurses in the worst male wards, where men were destructive, denuding themselves, etc., but learned that they were the wives of the male attendants on the same wards. The apartments for private patients are elegant.

There is no great amount of work done here, but I was interested in one shop, where children's toys of every variety are constructed by patients, and where fancy wood-carving and sawing, and straw mat-making are carried on. No restraint is in use in this asylum. Prof. Leidesdorf has an excellent Clinic for Psychiatry here.

The private asylum at Ober-Döbling, a suburb of Vienna, under the charge of Profs. Leidesdorf and Obersteiner, has some sixty patients, is elegantly fitted up, has beautiful grounds overlooking the city and the neighboring mountains. It is equal to private asylums in other parts of the world.

Four miles from Budapesth, in the midst of innumerable vine-clad and villa-covered hills, is the Leopoldfeld Asylum, with seven hundred and fifty patients. This was originally designed as the hospital for the curable cases of all Hungary, while the incurable were provided with an asylum on the opposite side of the city. But both institutions became in the course of time mixed asylums, and Leopoldfeld is now much overcrowded, and chiefly, as a matter of course, with chronic and incurable cases. Everything seemed neat and clean. No restraint is used among the men, but occasionally among the women. The occupations for the patients do not differ from those of other asylums. The system of heating is quite modern—indirect radiation—but the ventilation is wholly by means of windows.

The newest Austrian asylum is at Dobran in Bohemia, but the severity of the winter weather during my sojourn in Prague, unfortunately prevented my visiting it.

ITALY.—In a gondola one reaches the island of San Servolo, with its asylum for six hundred men, and the island of San

Clemente with its asylum for one thousand women—an hour's ride from the Piazzetta in Venice. Through the former I was shown by an intelligent monk, through the latter by the portier, for the directing physicians do not reside in the institutions, and were absent at the time of my visit. I was surprised at the beautiful, clean, polished mosaic floors, brightly painted walls, and the generally cheerful appearance of the interiors of both. In Italy, fortunately, windows can be open all the year round, for these form the only means of ventilation. San Clemente has dormitories with over one hundred beds, and the rooms smelled sweet. The buildings are of course absolutely fire-proof. Much restraint seemed to be used, and the patients were crowded together in large numbers in small day-rooms. The chief employments are garden work for the men, and sewing and weaving for the women. Monks and nuns are the nurses in charge. The noisy classes of patients were exceedingly noisy everywhere. At San Servolo I was astonished at the great albums of photographs of patients, and at the very complete and scientific histories of cases required and recorded. Every patient is photographed on admission, one photograph being placed in the history and another in the album. There are already many hundreds in the collection. The skull of every patient admitted is very accurately examined and measured, no less than fifteen different measurements being taken according to the best Italian craniometrical system, and recorded in the history.

I have before me the portly volume which is the report of the *Manicomio di Roma*, the insane asylum of Rome, for the septennium ending 1880. On the day of my visit there were over one thousand patients of both sexes. The old part in the *Via Lungara*, on the bank of the Tiber, is composed of a number of mansions, probably several centuries old, which, though clean, are not well adapted for a good asylum. The patients were crowded together in large numbers in diminutive day-rooms, were very noisy, and many were in restraint, wristlets, camisoles, straps around the ankles, and in restraining chairs. There are small airing courts without views. As the buildings are immediately contiguous to the street, all the windows of the street side were heavily ironed and darkened, making the interior very gloomy and dismal. After being conducted through this joyless labyrinth, I was escorted over the *Porta San Spirito* through a passageway leading to a part of the institution which is in extreme and delightful contrast to that lying along the Tiber. It is in fact the

larger portion of the asylum, and lies upon a sunny hill, close to St. Peter's, commanding wide views of all Rome and the Campagna, even to the remote peaks of the Appenines. This is the *sistema villaggio*. The government has purchased the Villa Barbarini for the women, and the adjacent Villa Gabrielli for the men. In addition to the numerous fine buildings upon the grounds at the time of acquisition, several new structures have been added; so that now I doubt if anywhere can be found a more agreeable example of the "village," or "cottage," or "villa system" than this portion of the asylum of Rome. Many of the buildings still remind one of the wealth of their former owners, with their marble stairways, marble tables, marble floors, mural frescoes, etc. Although it was midwinter, the grounds were all abloom with flowers, fountains were springing, the grass and trees were green, and patients were busy in the vegetable gardens. One of the larger buildings is occupied by one hundred and fifty sewing women. In another many women were at work with numbers of spinning wheels and about a dozen looms. At the Gabrielli grounds are over two hundred and fifty men. Here are the tailor, blacksmith, shoe and carpenter-shops, and more noteworthy still a large establishment for the making of straw goods of every description, such as baskets, rugs, matting, brooms, straw hats, etc., etc. The men are supervised by Belgian monks and ordinary Italian orderlies; the women by French nuns and common female attendants.

Professor Alessandro Solivetti, who occupies the chair of Psychiatry in the University of Rome, has his laboratory here, and kindly showed me his collections of skulls, pathological specimens, instruments of precision, etc., with which it is well supplied. A notable feature is the splendid library of medical books in all languages belonging to the institution. The hydropathic department, with its Turkish baths, varieties of douches, and apparatus of all kinds, is more complete than any I have seen elsewhere.

FRANCE.—A few miles from Paris on a series of terraces rising high above the picturesque banks of the Seine lies the Maison Nationale de Charenton, an asylum on the old cloister plan, with numerous courtyards, and having on the day of my visit some seven hundred patients of both sexes. It was founded by Esquirol, whose bronze statue stands in one of the courts. The interior is very clean and handsome. The patients were quiet and seemed to enjoy a great degree of comfort. But I was dis-

appointed at the meagre amount of work done. There were no shops. The only employment outside of ward work seemed to be a small amount of gardening done by the men. I was astonished at the amount of restraint used, having thought that the labors of Pinel would be still remembered so near the scene of the emancipation of the insane; but I counted no less than seventeen women in one room who were all either strapped to chairs or camisoled, or in wristlets with straps!

L'Hôpital de la Salpêtrière is the chief asylum for women in Paris. There are here some five thousand patients, not all of course insane, for it receives also pauper women in old age and when suffering from nervous diseases. The buildings are very antiquated and dismal, and one's interest centres here more especially in the clinic of Professor Charcot, whose recent studies in hypnotism, suggestion, transfer by magnets, hysteria, etc., form the themes of his present magnificent discourses.

The asylum for men, Hospice de Bicêtre, was founded several centuries ago. It has at present a population of three thousand two hundred, of which only one thousand are insane. While there is little that is noteworthy or pleasing in other departments, that for young idiots and epileptics, who number three hundred and forty, is entirely new and exceedingly interesting in every way. Professor Bourneville is in charge of this division, and conducted by him I had opportunity to see and admire its excellence of plan, care, employment and instruction. There are a number of one-story pavilions connected by corridors. The masonry both in the houses and outside is rounded off where patients would be apt to fall and injure themselves. The sewer system, heating and ventilation are modern and complete. The isolated building for cases of contagious disease is particularly noteworthy. In this the rooms for scarlatina, measles, etc., are entirely separated by partitions whose upper portions are of glass, and open separately upon a veranda, whose roof is wholly of glass. There are no angles in the rooms where disease germs may lodge, every corner where wall meets wall and ceiling being rounded so as to be easily cleaned and disinfected. The point of greatest interest, however, in Professor Bourneville's division is the various schools, playrooms and workshops, for the development of their intellects, where most astonishing progress is made by the boys. Everything is arranged so that the inmates may learn, even to the labeling with their names of every tree, shrub and flower in the pretty courtyards. Photographs of cases are taken as they are admitted,

and afterwards during the several years of their stay at regular intervals, showing the development with time of bright living faces from those once vacant and expressionless. The employments are gardening, school, kindergarten, games, blacksmithing and iron work, basket-making, carpentry, and sewing and tailoring. The large number of boys with the remains of infantile paralysis and hemiplegia sewing away in spite of defective arms and fingers, was surprising.

ENGLAND.—A limited furlough permitted me to visit but a few of the many asylums in and about London. No one would miss seeing the historic Bedlam—Bethlehem Lunatic Asylum—now in charge of Dr. George H. Savage. It stands smoke-begrimed in the midst of London, surrounded by a high brick wall; its grounds divided into several almost grassless and uninviting airing-courts. There are two hundred and eighty patients of both sexes, mostly recent cases, and all belonging to the “middle class,” as required by the original charter of the hospital. Its interior has everything that one could wish for in the way of comfortable and easy furniture, open fire-places, busts, pictures, birds, books, newspapers, plants, games, carpets, etc., etc. In the women’s wards, the panels of many doors have been beautifully decorated by patients skilled in the art of painting flowers. Restraint is rarely used, the camisole in surgical cases only. I saw about six cases wearing locked mittens. A few patients are paroled to visit the museums, theatres and libraries of the city. Dr. Savage employs the shower-bath, in an average of six cases daily, with great benefit, especially in young, excited girls. Massage is also used successfully in appropriate cases. The employments are few. Dr. Savage, with one assistant and two resident medical students, has charge of the medical department, while the business administration is in the hands of a non-medical officer. There are, I am told, only three or four asylums now in Great Britain, where the unsatisfactory system of having two heads is in vogue. These are Bethlehem, Hanwell, Colney Hatch and Banstead.

Colney Hatch, the Middlesex County Asylum, is but a short ride from London. It is, perhaps, the largest asylum in the world, having, on the day of my visit, two thousand four hundred patients of both sexes, all of whom are paupers from London. The large grounds are entirely surrounded by a high brick wall, and the patients are all in one building, behind which are numerous brick-walled airing-courts. In front are wide lawns, with shrubs and trees in abundance. A modern system of heating is used. The

ventilation is almost wholly by means of the windows, which are numerous and large. The employments are few and not extensive; gardening and farming, a few shops, the kitchen and sewing-rooms being foremost. Only one person was in restraint, and this was for a Colles' fracture. Restraint is wholly limited to surgical cases. Seclusion is rare. The attendants are in the ratio of one to ten disturbed, and one to twenty quiet patients. Over one-half of the attendants live off the grounds, in their own homes, with their families, a happy system, which ensures long keeping and great contentment. The wards were all very comfortable and homelike. The largest dormitory had one hundred and six beds. In the way of amusements the patients have associated dances, concerts, theatres, football, etc.

The administration is of an obsolete character. There is a steward in charge of the business of the institution, while a physician is the medical head of each of the two divisions for men and women. A redeeming feature of the system here is, that the hiring and discharging of attendants is a prerogative of the physicians. Each medical superintendent has two assistant physicians, making in all one physician for each four hundred patients, which, in my opinion, is about one-fourth of the number that ought to be provided. Dr. Seward, who has charge of the male division, and to whose courtesy I am indebted for what I saw and learned of Colney Hatch Asylum, informed me that no scientific work is done here at all. There is no time for it.

I was delighted at having an opportunity to inspect the newest and latest asylum in Great Britain, viz.: that at Cane Hill, in the county of Surrey, about an hour from London. This was built by the architect to the Commissioners in Lunacy, and is supposed to embody, in structure and administration, the most modern English ideas.

Just as Alt-Scherbitz, in Germany, seemed to me the best type of the village plan of caring for the insane, so Cane Hill stands in relation to the system of providing for this class in large numbers in one building. Radically distinct as the two so-called "cottage" and "block" systems are, it is not strange that in each of these typical institutions there should be a slight leaning toward the system of the other; for doubtless the ideal asylum, when it is built, will be one which shall have assimilated what is best in both plans. At Alt-Scherbitz is already one large pavilion, with a great number of demented women in it; at Cane Hill a dozen male patients live with the farm bailiff, the same number with the gardener, and a

dozen women occupy a small cottage, in charge of a married nurse. But the remainder of the eleven hundred Cane Hill patients are housed in one labyrinthine building, which is to be extended until it shall accommodate two thousand. It was first opened for the reception of patients in December, 1883. There are about one hundred and fifty acres of land. The asylum stands on a height commanding wide views of the beautiful Surrey hills and valleys. The water is supplied by a deep well, whence it is pumped into a lofty tower and from there distributed where needed. The sewage is disposed of in the same familiar manner as at Croydon near by, eight acres of Italian rye grass being effectually irrigated. The superintendent, Dr. Moody, is well pleased with this plan. The heating is by hot water coils, supplemented by open fire-places, which are protected by screens. The ventilation is chiefly by windows, which in so mild a climate as England can usually be kept open at all seasons; but other means are provided, such as openings near the floors, directly through the walls, a foot or more square, protected by wire screens. The chapel and recreation hall are each very handsome, and have a seating capacity each of eight hundred. I have seen no other asylum where the wards present so much diversity of size and form. The air-space for each patient is fifty square feet, superficial area, and about seven hundred cubic feet in the dormitories; forty square feet, superficial area, and about five hundred and fifty cubic feet in the day-rooms; while some of the single rooms have over twelve hundred cubic feet.

No window in the institution is barred. Windows open about five inches at top and bottom, and are controlled by locks, so that they can be wholly opened when the rooms are unoccupied. The sashes are of white pine. The window-panes are 6x14, and there are fifteen such panes in each lower sash, which figures show the relative size of the windows.

The wards have pictures, plaster figures, fern cases, aquaria, chinaware, birds, curtains, newspaper slopes, bookcases, plants, mirrors, easy chairs, antimacassars, etc., etc., everywhere in the disturbed as well as in the quiet wards. The floors were adorned with linoleum, of bright and variegated patterns. The perfect quiet and order of the wards were to me very impressive. All the nurses, both male and female, were in neat uniforms. No restraint of any kind, nor seclusion, has been used since the opening of the asylum. There are six night-watches for each sex, whose visits are recorded hourly in the superintendent's office by means of an elaborate electric system.

The amusements are all that are common to other asylums. The usual employments are in vogue. In spite of the small size of the farm some three hundred men find daily out-door occupation. The women work in the laundry, kitchen and sewing-room in large numbers. The superintendent has but two assistant physicians. But still some scientific work is done. Autopsies are made upon two-thirds of the cases that die there. Every patient is photographed on admission and the photographs pasted in the case-book.

Every precaution is taken against fire, even to the organization of a fire drill for the male attendants under the direction of a member of the London Fire Brigade.

